FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

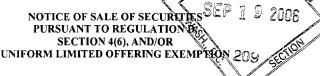
FORM D

OMB Number: 3235-0076

OMB APPROVAL

Expires: April 30, 2008

Estimated average burden hours per response 16.0



>	SEC USE ONLY		
refix	·	Serial	
	_ DATE F	RECEIVED	

Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Private Placement of \$500,000,000 in limited partnership interests. $/\sqrt{0.5}$
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
HLM International Equity Limited Partnership
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
50 Division Street, Suite 401 Somerville, New Jersey 08876 (908) 218-7900
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business
Private Investment Company exempt from Investment Company Act of 1940 pursuant to §3(c)(1)
Type of Business Organization
□ corporation □ limited partnership, already formed □ other (please specify): THOMSON □ business trust □ limited partnership, to be formed □ FINANCIAL
Month Year Actual or Estimated Date of Incorporation or Organization: 0 2 9 4
CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	ote or dispose, or direct the vote or ate issuers and of corporate gene	ve years; or disposition of, 10% or more of a class of equity ral and managing partners of partnership issuers; a	
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Harding, Loevner Management, L.P.*			•
Business or Residence Address	(Number and Street, City,	State, Zip Code)	
50 Division Street, Suite 401, Somerville	e, New Jersey 08876		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer ☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
HLM Holdings, Inc.*			
Business or Residence Address	(Number and Street, City,	State, Zip Code)	
50 Division Street, Suite 401, Somerville	e, New Jersey 08876		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		General and/or Managing Partner
Full Name (Last name first, if individual)			
Loevner, David R.*			
Business or Residence Address	(Number and Street, City,	State, Zip Code)	
50 Division Street, Suite 401, Somerville	e, New Jersey 08876		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		General and/or Managing Partner
Full Name (Last name first, if individual)			144000
Hallett, Simon*			
Business or Residence Address	(Number and Street, City,	State, Zip Code)	
50 Division Street, Suite 401, Somerville	e, New Jersey 08876		·· ·····
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	⊠ Executive Officer	General and/or Managing Partner
Full Name (Last name first, if individual)			
Singleton, Patrice M.*			
Business or Residence Address	(Number and Street, City,	State, Zip Code)	
50 Division Street, Suite 401, Somervill	e, New Jersey 08876		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		General and/or Managing Partner
Full Name (Last name first, if individual)	. J. 44.0		
Walsh, Alexander T.*			
Business or Residence Address	(Number and Street, City,	State, Zip Code)	

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

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Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Roll, Ferrill D.*
Business or Residence Address (Number and Street, City, State, Zip Code)
50 Division Street, Suite 401, Somerville, New Jersey 08876
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Johnson, Gaylord III*
Business or Residence Address (Number and Street, City, State, Zip Code)
50 Division Street, Suite 401, Somerville, New Jersey 08876
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Moody, Sidney C.*
Business or Residence Address (Number and Street, City, State, Zip Code)
50 Division Street, Suite 401, Somerville, New Jersey 08876
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Reiter, Richard T.*
Business or Residence Address (Number and Street, City, State, Zip Code)
50 Division Street, Suite 401, Somerville, New Jersey 08876
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Renzulli, Lori *
Business or Residence Address (Number and Street, City, State, Zip Code)
50 Division Street, Suite 401, Somerville, New Jersey 08876

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

^{*} HLM Holdings, Inc. is the General Partner of Harding, Loevner Management, L.P. David R. Loevner, Simon Hallett, Patrice M. Singleton, Alexander T. Walsh, Ferrill D. Roll, Gaylord Johnson III, Sidney C. Moody and Richard T. Reiter are Directors and Executive Officers of HLM Holdings, Inc. Lori Renzulli is an Executive Officer of HLM Holdings, Inc.

	B. INFORMATION ABOUT OFFERING	
	Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	\boxtimes
	Answer also in Appendix, Column 2, if filing under ULOE.	
2.	What is the minimum investment that will be accepted from any individual?	
	Yes	No
3.	Does the offering permit joint ownership of a single unit?	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly	
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of s broker or dealer, you may set forth the information for that broker or dealer only.	. If a ate or
Full Nam	ne (Last name first, if individual)	
Dusinoss	or Residence Address (Number and Street, City, State, Zip Code)	
Dusiliess	of Residence Address (Number and Street, City, State, Zip Code)	
Nama of	Associated Broker or Dealer	
Name of	Associated broker of Dealer	
States in	Which Person Listed Has Solicited or Intends to Solicit Purchasers	
	_	States
•	——————————————————————————————————————	[ID]
		[MO]
[MT]		[PA]
[RI]		[PR]
	ne (Last name first, if individual)	[110]
_ ,	,	
Business	or Residence Address (Number and Street, City, State, Zip Code)	
Name of	Associated Broker or Dealer	
States in	Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check	"All States" or check individual States)	
[AL]	[AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
		[MO]
[MT]		[PA]
[RI]		[PR]
Business	or Residence Address (Number and Street, City, State, Zip Code)	
Name of	Associated Broker or Dealer	
States in	Which Person Listed Has Solicited or Intends to Solicit Purchasers	
		l States
[AL]	[AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]
[IL]		[MO]
[MT]		[PA]
ו ואן		[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, chec this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	k	
		Aggregate	Amount Already
		Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$ 500,000,000	\$ 2,000,000
	Other (Specify)	\$	\$
	Total	\$ 500,000,000	\$ 2,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of person who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	\$ 2,000,000
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)	-	\$
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Dollar Amount
	Type of offering	Security	of Purchases
	Rule 505		\$
	Regulation A		s
	Rule 504		- s
	Total		\$
4.a	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ -0-
	Printing and Engraving Costs		\$ -0-
	Legal Fees		\$ 10,000
	Accounting Fees		\$ -0-
	Engineering Fees		\$ -0-
	Sales Commissions (specify finders' fees separately)		\$ -0-
	Other Expenses (identify) communications and deliveries		\$ -0-
	Total		\$ 10,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Question 1 and total expenses furn "adjusted gross proceeds to the issu 5. Indicate below the amount of the used for each of the purposes sho estimate and check the box to the the adjusted gross proceeds to the is Salaries and fees Purchase of real estate.	the aggregate offering price given in response to Part C ished in response to Part C – Question 4.a. This difference is the control of the control of the amount for any purpose is not known, furnish left of the estimate. The total of the payments listed must equivariant equivariant to the payments of	he be an	\$ 499,990,000 Payments To
used for each of the purposes sho estimate and check the box to the the adjusted gross proceeds to the is Salaries and fees Purchase of real estate.	own. If the amount for any purpose is not known, furnish left of the estimate. The total of the payments listed must equipose sate forth in response to Part C – Question 4.b above.	Payments to Officers, Directors, &	•
Salaries and fees Purchase of real estate.		Officers, Directors, &	•
Purchase of real estate.		Directors, &	•
Purchase of real estate.		•	•
Purchase of real estate.			Others
		\$	□ \$
Purchase, rental or leasi		□ \$	\$
	ing and installation of machinery and equipment	\$	 \$
Construction or leasing	of plant buildings and facilities	□ \$	 \$
offering that may be	businesses (including the value of securities involved in this used in exchange for the assets or securities of another rger).		\$
Repayment of indebted	lness	□\$	\$
Working capital		□ \$	—
Other (specify): Inv	vestment in Affiliate	□ \$	 □ \$
Column Totals		□ \$	 \$499,990,000
Total Payments Listed	(column totals added)	⊠ \$_	499,990,000
	D. FEDERAL SIGNATURE		
following signature constitutes an u	ce to be signed by the undersigned duly authorized person. If indertaking by the issuer to furnish to the U.S. Securities and furnished by the issuer to any non-accredited investor pursuant	l Exchange Comm	ission, upon written
Issuer (Print or Type) HLM International Limited Partn	Signature / / / / / / / / / / / / / / / / / / /	Date September 14, 2	2006
Name of Signer (Print or Type) David R. Loevner	Title of Signer (Print or Type): President of HLM partner of Harding, Loevner Management, L.P Issuer	0 , ,	